

## DVV - Domestic Violence, Victim

### DVV-C      COMPLICATIONS

**OUTCOME:** The patient/family will understand the complications that can result when domestic violence is not addressed.

**STANDARDS:**

1. Explain that domestic violence usually progresses over time and may develop into the serious physical and mental problems in the victim. Explain that the violence of perpetrators often escalate into experiences of “red outs” that result in serious injuries and death. This level of violence often could not have been anticipated by the perpetrator’s previous behavior.
2. Explain that physical and sexual assault, physical threats, hitting with objects, verbal abuse, and/ or controlling behaviors are often responsible for the development of mental disorders, including depression, anxiety, posttraumatic stress disorder, and personality disorders, and have resulted in serious injury and death.
3. Explain that children who witness violence in the home are additionally in danger of developing the same mental disorders, and have an increased likelihood of becoming a victim and/or perpetrator in their future relationships.

### DVV-CUL      CULTURAL/SPIRITUAL ASPECTS OF HEALTH

**OUTCOME:** The patient/family will understand the impact and influences cultural that spiritual traditions, practices, and beliefs have on health and wellness.

**STANDARDS:**

1. Discuss the potential role of cultural/spiritual traditions, practices and beliefs in achieving and maintaining health and wellness. Refer to clergy services, traditional healers, or other culturally appropriate resources.
2. Explain that traditional medicines/treatments should be reviewed with the healthcare provider to determine if there are positive or detrimental interactions with prescribed treatment. Explain that the medical treatment plan must be followed as prescribed to be effective.

### DVV-DP      DISEASE PROCESS

**OUTCOME:** The patient/family will understand that domestic violence is a chronic and preventable condition involving a specific pattern of behaviors, beliefs, attitudes, and feelings.

**STANDARDS:**

1. Discuss the abusive, violent, and controlling behavior, and/or the pattern of victimization.
2. Explain co-dependency as it relates to domestic violence. Discuss the patient's ability to opt-out of the relationship, e.g., safe houses.
3. Discuss the role of alcohol and substance abuse as it relates to domestic violence.
4. Explain that the natural course of domestic violence is one of escalation and that without intervention it will not resolve. The progression of abuse may be conceptualized as including:
  - a. Early Stage: Excessive jealousies, accusations of cheating, excessive questioning about whereabouts and companions, monitoring time, and/or alienation from friends and family.
  - b. Middle Stage: In addition to the previous stage, one may experience verbal abuse, criticism, threats to hurt or kill, or threats of suicide.
  - c. Late Stage: In addition to previous stages, may also include all forms of physical abuse, including slapping, pushing, punching, kicking, choking, sexual abuse, use of weapons, and/or blocking escape.
    - i. Explain that the violence of perpetrators often escalate into experiences of "red outs" that result in serious injuries and death.
    - ii. These behaviors that could not have been anticipated by the perpetrator's previous behavior.

**DVV-FU FOLLOW-UP**

**OUTCOME:** The patient/family will understand the importance of follow-up and will make a plan to keep follow-up appointments.

**STANDARDS:**

1. Discuss the importance of follow-up care.
2. Discuss the procedure for obtaining follow-up appointments.
3. Emphasize that appointments should be kept.
4. Discuss the plan of action for situations that are dangerous or life threatening.

**DVV-IR INFORMATION AND REFERRAL**

**OUTCOME:** The patient/family will receive information and referral for alternative or additional services as needed or desired.

**STANDARDS:**

1. Provide the patient/family with alternative or additional sources for care and services.

2. Provide the patient/family with assistance in securing alternative or additional resources as needed.

## **DVV-L      LITERATURE**

**OUTCOME:** The patient/family will receive literature about domestic violence.

### **STANDARDS:**

1. Provide the patient/family with literature on domestic violence.
2. Discuss the content of the literature.

## **DVV-P      PREVENTION**

**OUTCOME:** The patient/family will understand risk factors and behaviors that predispose to domestic violence and develop a plan to avoid relationships and situations which may result in domestic violence.

### **STANDARDS:**

1. Explain predisposing risk factors for domestic violence, including a pathological need for control, alcohol and/or substance abuse, history of child abuse and/or domestic violence in the family of origin, etc.
2. Explain that, regardless of the victim's behavior, environmental stressors, physiologic changes, shifts in mood, and illnesses may precipitate violent behavior in persons who are predisposed to violent behaviors.
3. Discuss how to identify "red flag" behaviors in current or potential partners:
  - a. Excessive jealousies and accusations of cheating
  - b. Monitoring time, such as driving time and delays
  - c. Excessive questioning about whereabouts and companions
  - d. Alienation from friends and family
  - e. Verbal abuse (criticizing, name calling)
  - f. Rummaging through personal belongings
  - g. Other excessive controlling behaviors
4. Develop a plan of care to avoid violent relationships.

## **DVV-PSY      PSYCHOTHERAPY**

**OUTCOME:** The patient/family will understand the goals and process of psychotherapy in the treatment of domestic violence.

**STANDARDS:**

1. Emphasize that full participation and follow-up is critical to treatment success.
2. Emphasize the importance of openness and honesty with the therapist, and discuss issues of safety, confidentiality, and responsibility,
3. Explain that the therapist and the patient will establish goals and duration of therapy together.

**DVV-S      SAFETY**

**OUTCOME:** The patient/family will understand the safety issues as they relate to domestic violence.

**STANDARDS:**

1. Be sure family members and other victims are aware of shelters and other support options available in their area. Make referrals as appropriate.
2. Assist to develop a plan of action that will insure safety of all people in the environment of violence.
3. Explain the need for the family to develop a safety plan if and when the victim decides to leave the home.

**DVV-SM      STRESS MANAGEMENT**

**OUTCOME:** The patient will understand the role of stress management in domestic violence.

**STANDARDS:**

1. Explain that uncontrolled stress often exacerbates domestic violence.
2. Discuss that stress may exacerbate adverse health behaviors such as increased tobacco, alcohol or other substance use, all of which can increase the risk of domestic violence.
3. Emphasize the importance of seeking professional help as needed to reduce stress.
4. Discuss various stress management strategies which may help maintain a healthy lifestyle. Examples may include:
  - a. Becoming aware of your own reactions to stress
  - b. Recognizing and accepting your limits
  - c. Talking with people you trust about your worries or problems
  - d. Setting realistic goals
  - e. Getting enough sleep
  - f. Maintaining a reasonable diet

- g. Exercising regularly
  - h. Taking vacations
  - i. Practicing meditation, self-hypnosis, and positive imagery
  - j. Practicing physical relaxation methods such as deep breathing or progressive muscular relaxation
  - k. Participating in spiritual or cultural activities
5. Provide referrals as appropriate.

## **DVV-TX      TREATMENT**

**OUTCOME:** The patient/family will understand the treatment options for domestic violence.

### **STANDARDS:**

1. Explain the need to acknowledge the repeated cycle of violence and request help. Explain that it is unrealistic to expect change without help, even when both partners desire the change.
2. Explain that violence often cannot be avoided within many relationships by changing the victim's behaviors alone.
  - a. Explain that the victim is not responsible for the violence, and that other options for conflict resolution and taking care of the family may be learned.
  - b. Explain the perpetrator will not be able to end the violence without help despite any changes in the victim's behavior.
3. Review the treatment options available, including medication, individual and group therapy as well as the potential risk or contraindications of other options, such as family or couples counseling.
4. Discuss the importance of individual or group psychotherapy in:
  - a. changing negative cognitions/low self esteem.
  - b. learning assertiveness skills, including time out, assertive communication, changing self-talk, etc.
  - c. healing precipitating childhood and adulthood factors of past abuse, neglect, and abandonment.
  - d. addressing co-dependency, and the fears of abandonment.
  - e. treating associated conditions, such as depression and posttraumatic stress disorder.